PATENT APPLICATION FEE DETERMINATION RECO									Application or Docket Number				
Effective October 1, 2000							OHL	,	09894162				
ı	CLAIMS AS FILED - PART I							CMALL					
I	(Column 1) (Column 2)						7	TYPE	ENTITY	0		ER THAN LL ENTITY	
FOR			1	13_				RATE	FEI	E	RATI		
				ER FILED	NUA	MBER EXTRA		BASIC F	EE 355.	00 0	R BASIC F		
巾	TOTAL CHARG	73	minus 20=	•	53	1	X\$ 9=				0 =1		
IJ⊢	NDEPENDENT		minus 3 =		1		X40=	+	\dashv	Yés			
MULTIPLE DEPENDENT CLAIM PRESENT						1	71100		- - 0	X80=	180		
* If the difference in column 1 is less than zero, enter "0" in column 2							•	+135=			+270=	:	
CLAIMS AS AMENDED - PART II								TOTAL	· L	0	TOTAL		
Γ	8 - [-05 (Column 1) (Column 2) (Column 3)							SMALI	. ENTITY	OF		R THAN L ENTITY	
AMENDMENT A	Total	REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI TIONA FEE		RATE	ADDI- TIONAL FEE	
	Independent	. 30	Minus	- 1	3	=		X\$ 9=		OR	X\$18=		
AR	FIRST PRES	1	Minus MULTIPLE DI	EPENDENT	4 CLAIM	=		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR		1	
											TOTA		
		A	ODIT. FEE		OR	ADDIT. FE							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Columi HIGHE NUMBE PREVIOU PAID FO	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	<u> </u>	Minus	••		=		X\$ 9=		OR	X\$18=	FEE	
ξ	Independent	ENTATION OF M	Minus	•••		=		X40=			X80=		
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,	19.42	(Column 1) CLAIMS	17	(Column		(Column 3)						1	
- NOWEN		REMAINING AFTER AMENDMENT		NUMBER PREVIOUS PAID FOI	R SLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
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1	Independent	AITATION OF AN	Minus	***		=	-			OR			
4	. MOI PRESE	NTATION OF ML	LTIPLE DEP	ENDENT CL	AIM		 	40=		OR	X80=		
if • if	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									ОЯ	+270≃	·	
••	the "Highest Nur	ADD	TOTAL T. FEE		OR AI	TOTAL DDIT. FEE							
_ ''	e mignest Numi	ber Previously Paid	For (Total or	Independent) i	is the h	ghest number to	ound ir	the appr	opriate box	in colur	TIN 1.		
_	TO-875												
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